21503 60210	37304 0			of Nek	oraska Jator's	Мо	tor	Vel	hicl	e A	ccid	er	nt Re	port		Shee	et1	of _	3
1	Total Number Local No./ District 78 Agency Case No. No. B5-08516					E166		HIT & F			HIT & RUN			NVESTIGATION MADE AT SCENE?			L		
A/1	of Vehi		M / D D / Y Y Y Y Y					0010				YES X NO (In Military Time)				XYES NO STATE USE ONLY			1
01	DATE OF ACCIDENT		M / D D / Y Y Y Y Y S M T \ 4/2015 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					N TH	TH F S TIME OF 0805					01/112 00	L OIVE				
A/2	ACCIDENT							JЦL	POLICE 00										
	PLACE OF	COUNTY	Lancaster						POLICE NOTIFIED 0810			09/14/2015							
В	ACCIDENT	CITY	Lincoln						PRIVATE YES NO PROPERTY?				LATITUDE				-		
69	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. 14th/O-P										EATHODE								
с 1	DISTANCE	FROM	FEET		N	S E	W OF	EDOST			HIGH	HWAY	STREET? NO.	X O	LONGITUE	ΣE			1
	MILEPO	MILEPOST MILEPOST IF AT INTERSECTION					T		IE NO	T AT IN	AT INTERSECTION								
1						X >FE	ET C						ROSSING	1					
V1/M	1					150	0.00		X		O St								
14	MILES				ACCIDENT V	VAS OUTS	SIDE CI				DISTANC		ROM NEAF	REST TOWN					1
V2/M	MILES		N	S E	M AND MILES			N	S E		TY OR TOW								
	R. work	R1	R2 I	R3 R4	S. PEDES	TRIAN	S1	S2	S3	S4 S5	-a S5-b	S6-a	S6-b	DOES ACCID					1
E	ZONE CODES	1			CLASS CODES	IFICATION	N			STATE DEPT. OF					F ROADS' PROPERTY?				
2								VE	HICLE	NO. 1									1
F 1	DRIVER LICENSE		NO.	379778	98									STATE (Of License)	TX	SI		FEMALE	
1 V1/N	DRIVER	/									PHONE		1 2001	(Or Electrice)	LOCAL N	D.		VIVIALE	1
1	Jordan \ DRIVER ADDRI		es			CITY,	STATE, Z	ZIP			402	. / / ().3881	DATE OF					V1/1
V2/N	5535 T S	535 T St., Lincoln, NE 68504								IDUONE			BIRTH (MM / DD / YYY	Y)					
	-	NER SUPERIOR SERVICE LLC									43 V1/2								
^G 3	OWNER ADDRI		CITY, STATE, ZIP CITATION YES CITATION NO.																
Н	5840 N 70th, Lincoln, NE 68507 LICENSE TE NO. RLR004										YEAR	2016		STA					
5	PLATE	<u> </u>	NO. F		MAKE		MODEL			BODY ST	YLE	(Pla	color		ESTIMATED	(Of P	,	NE	V1/4
V1/O	VEHICLE		2006		Internati	onal H	440			Trac	tor with	n se	white	E COMPANY	TOTALE	D \$	0		
1	VEHICLE ID NO. (VIN)	1HS	SMTA	AAN16H	1291568									O Ins. Co					V1/5 43
V2/O	TOWED TO					TOWED BY	Y						POLICY NO	72457291	29				V1/6
								VE	HICLE	NO. 2			Ditt	72 107201					25
1	DRIVER LICENSE	-	NO.											STATE (Of License)		SI	- x	FEMALE	
V1/P	DRIVER										PHONE			(67 2,00,100)	LOCAL N	0.		VIVIALL	
1	DRIVER ADDRI	ESS				CITY,	STATE, Z	ZIP						DATE OF					V2/1
V2/P	OWNER										PHONE			BIRTH (MM / DD / YYY	Y) LOCAL N	2			V2/2
J	OWNER										FHONE				LOCAL IN	<i>J</i> .			
01	OWNER ADDRI	ESS		<u></u>		CITY,	STATE, Z	ZIP			·		PENDI	YES	CITATION	NO.		·	V2/3
V1/Q	LICENSE												YEAR			STA			V2/4
4	PLATE	YEAR	NO.		MAKE		MODEL			BODY ST	YLE	(Pla	COLOR		ESTIMATED		′		ł
V2/Q	VEHICLE												INISLIDANO	E COMPANY	TOTALE	D \$			V2/5
K	VEHICLE ID NO. (VIN)												INSONAINO	L COMI AIVI					V2/6
01	TOWED TO					TOWED BY	Y						POLICY NO).					V2/0
	(Comp	lete	this se	ction for	all in	jured	l pers	sons			Т	DATE	OF BIRTH	1 Seat	2	3 Rody	4 5	SEX
VEH. #	NAME	(Com	plete a	continuation	on report, if n	nore than	three we	ere injur	red)				(MM /	DD / YYYY)	Position	Eject	Body Region	Injury Sev. Tra	ns. MF
	LOCAL NO. MEDICAL FACILITY NAME					EMS SERVICE NAME EMS RUN REPORT NO.													
VEH. #	NAME		1		AD	DRESS						\top							
	LOCAL NO.		MEDIC/	AL FACILITY N	JAME				EMS SE	RVICE NA	ME				EMS RU	N REP	ORT NO		
				OILITTN						OL IVA					LIVIO IXU	INEPY	140.		
VEH. #	NAME				AD	DRESS													
	LOCAL NO.		MEDICA	AL FACILITY N	NAME				EMS SE	RVICE NA	ME				EMS RU	N REP	DRT NO.		

				IDICATE	N IS REQUIRED			ENCY CASE NO.			
()				NDICATE	BY DIAGRAM WHAT F	IAPPENED	. B	5-085166			
Indicate											
North y Arrow											
							To P St.		•		
							14th St.				
		POI:									
		Approx. 150 ' N of N o Approx. 1' W of W of					From O St.				
		No Skid Marks									
		NO ORIGINATES									
							Alley 14th-Centennie	el/O-P	•		
				1	N Design						
	•								•	•	
				l.	11	Į.	Not To S	cale			
river of Ve	ehicle 1 was ba	acking V1 from the alleyw	vay 14th-Cen	tennial/O-	P St.'s While backing	g the trailer o	f the truck hit	an adjacent p	arking me	eter belo	ong
_	meter post		f Lincoln 8		t., Lincoln, NE 68	3508	PHONE 402.441.72	275	APPROX. C		
	meter post		f Lincoln 8	ADDRESS 50 Q S1 ADDRESS	t., Lincoln, NE 68	3508		275			
Parking OBJECT DAMA	meter post	Park & Go City of	f Lincoln 8	50 Q St	t., Lincoln, NE 68	3508	402.441.72	275	\$ 100 APPROX. C		
Parking DBJECT DAMA	meter post	Park & Go City of	f Lincoln 8	50 Q S1	t., Lincoln, NE 68	3508	402.441.72		\$ 100 APPROX. C \$		
Parking DBJECT DAMA NAME NAME VEHICLI	g meter post	Park & Go City of	IMPACT AND	ADDRESS ADDRESS ADDRESS	airbag deployed) RES	402.441.72 PHONE	PHO PHO	\$ 100 APPROX. C \$ NE	OST OF D	AMA E H
Parking DBJECT DAMA NAME VEHICLI BEFOR	g meter post AGED E MOVEMENT E COLLISION	Park & Go City of	IMPACT AND MAGED AREA	ADDRESS ADDRESS ADDRESS	t., Lincoln, NE 68) RES	402.441.72 PHONE	PHO PHO PHO ALCOHOM	\$ 100 APPROX. C \$ NE VEH 1 L Driver	OST OF DA	AMA
Parking OBJECT DAMA NAME VEHICLI BEFOR	MOVEMENT E COLLISION ROAD OR HIGHWAY NAM	Park & Go City of	IMPACT AND MAGED AREA	ADDRESS ADDRESS ADDRESS	AIRBAG DEPLOYED VEHICLE 1) RES	402.441.72 PHONE	TOTAL OCCUPAN ALCOHOL TESTING	\$ 100 APPROX. C \$ NE VEH 1 L Driver No. 1	OST OF DA	AMA
Parking DBJECT DAMA NAME VEHICLI BEFOR	E MOVEMENT E COLLISION ROAD OR HIGHWAY NAM	POINT OF MOST DAN (Enter numbers VEHICLE 1 POINT OF IMPACT 05	IMPACT AND MAGED AREA s for each vehic VEHIC	ADDRESS ADDRESS ADDRESS	AIRBAG DEPLOYED VEHICLE 1	1 None us 2 Lap & s	HO2.441.72 PHONE TRAINT USE VEHICLE 1 2 ded - vehicle occup houlder belt used	TOTAL OCCUPAN ALCOHOL TESTING ALCOHOL LEVEL TESTED	\$ 100 APPROX. C \$ NE VEH 1 L Driver No. 1 Y N X	OST OF DA	EH 2
Parking DBJECT DAMA NAME VEHICLI BEFOR	E MOVEMENT E COLLISION ROAD OR HIGHWAY NAM	Park & Go City of OWNER NAME POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT 05 MOST DAMAGED 00	IMPACT AND MAGED AREA s for each vehic	ADDRESS ADDRESS ADDRESS	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed	1 None us 2 Lap & s 3 Shoulde 4 Lap belt 5 Child sa	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used r belt only used only used fety seat used	TOTAL OCCUPAN ALCOHO TESTING ALCOHO LEVEL TESTED BAC LEVEL	\$ 100 APPROX. C \$ NE NE VEH 1 L Driver No. 1 Y N X	1 VE 2 Driver No. 2 Priver	EH 2 Pe t
Parking OBJECT DAMA NAME VEHICLI BEFOR INSEW	E MOVEMENT E COLLISION W ROAD OR HIGHWAY NAM 14th 06 Turning left 07 Making U-t 08 Entering traffic lane	POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT 05 MOST DAMAGED AREA 00 00 None	IMPACT AND MAGED AREA s for each vehic VEHIC POINT OF IMPACT MOST DAMAGED	ADDRESS ADDRESS ADDRESS	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed 5 Not applicable/ No airbag available	1 None us 2 Lap & si 3 Shoulde 4 Lap belt 5 Child sa 6 Child bo 7 DOT ap 8 Costume	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used only used fety seat used oster seat used oster seat used or vehicle oster seat used be helmet used	TOTAL OCCUPAN ALCOHO TESTING ALCOHOL LEVEL TESTED BAC LEVEL ALCO	\$ 100 APPROX. C \$ NE VEH 1 L Driver No. 1 Y N X - HOL/ IGS	1 VE 2 Driver No. 2 Y	EH 2 Pe t
Parking OBJECT DAMA NAME VEHICLI BEFOR IN S E W A A D2 Essentially straight ahead	meter post AGED E MOVEMENT E COLLISION V ROAD OR HIGHWAY NAM V 14th 06 Turning left 07 Making U-t 08 Entering traffic lane 09 Leaving traffic lane	Park & Go City of OWNER NAME POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT 05 MOST DAMAGED AREA 00	IMPACT AND MAGED AREA s for each vehic VEHIC POINT OF IMPACT MOST DAMAGED AREA 02 03	ADDRESS ADDRESS ADDRESS	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed 5 Not applicable/	1 None us 2 Lap & s 3 Shoulde 4 Lap belt 5 Child sa 6 Child bo 7 DOT age 8 Costume 9 Restrain	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used r belt only used fety seat used oster seat used oster seat used oster seat used oroved helmet used	TOTAL OCCUPAN ALCOHOL TESTING ALCOHOL LEVEL TESTED BAC LEVEL ALCO DRU SUSPE 1 Neither	\$ 100 APPROX. C \$ NE VEH 1 L Driver No. 1 Y N X HOL/ JGS ECTED alcohol nor	1 VE 2 Priver No. 2 Y N Driver No. 1 1 drugs sus	EH 2
Parking OBJECT DAMA NAME VEHICLI BEFOR IN S E W O2 Essentially straight ahear Backing	MOVEMENT E MOVEMENT E COLLISION V ROAD OR HIGHWAY NAM V 14th 06 Turning left 07 Making U-ti 08 Entering traffic lane 09 Leaving	POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT DAMAGED AREA 00 None 09 Top & windows 10 Undercarriage 11 Total (all areas) 11 Othor	IMPACT AND MAGED AREA s for each vehic POINT OF IMPACT MOST DAMAGED AREA 02 03	ADDRESS ADDRESS ADDRESS ADDRESS iccle) LE 2	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown	1 None us 2 Lap & s 3 Shoulde 4 Lap belt 5 Child sa 6 Child bo 7 DOT age 8 Costume 9 Restrain	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used r belt only used only used fety seat used oster seat used oroved helmet used t use unknown	TOTAL OCCUPAN ALCOHOL LEVEL TESTED BAC LEVEL ALCO BAC LEVEL SUSPE 1 Neither 2 Yes - ald 3 Yes - dr	\$ 100 APPROX. C S NE VEH 1 L Driver No. 1 Y N X HOL/ JGS ECTED	1 VE 2 Priver No. 2 Y N Driver No. 1 1 drugs susceed	EH 2 Pet t Y N
Parking DBJECT DAMA NAME VEHICLI BEFOR N S E W X D2 Essentially straight ahead Backing Changing lan Overtaking/ Passing Turning right	MOVEMENT TE COLLISION ROAD OR HIGHWAY NAM 14th 06 Turning left 07 Making U-t 08 Entering traffic lane 09 Leaving traffic lane 10 Parked 11 Slowing or stopped in 12 Other	POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT DAMAGED AREA 00 None 09 Top & windows 10 Undercarriage 11 Total (all areas) 12 Other	IMPACT AND MAGED AREA s for each vehic VEHIC POINT OF IMPACT MOST DAMAGED AREA 02 03	ADDRESS ADDRESS ADDRESS ADDRESS icicle) LE 2 04 05 05	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown VEHICLE 2	1 None us 2 Lap & s 3 Shoulde 4 Lap belt 5 Child sa 6 Child bo 7 DOT age 8 Costume 9 Restrain	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used r belt only used only used fety seat used oster seat used oroved helmet used t use unknown	TOTAL OCCUPAN ALCOHOL LEVEL TESTED BAC LEVEL ALCO BAC LEVEL SUSPE 1 Neither 2 Yes - ald 3 Yes - dr	S 100 APPROX. C S NE VEH 1 L Driver No. 1 Y N X HOL/ JGS ECTED alcohol nor cohol suspe ugs suspect cohol & drug	1 VE 2 Priver No. 2 Y N Driver No. 1 1 drugs susceed	EH 2
Parking DBJECT DAMA IAME VEHICLI BEFORI N S E W X O2 Essentially traight ahead Backing Changing lan Dvertaking/ Passing	MOVEMENT TE COLLISION ROAD OR HIGHWAY NAM 14th 06 Turning left 07 Making U-t 08 Entering traffic lane 09 Leaving traffic lane 10 Parked 11 Slowing or stopped in 12 Other	POINT OF MOST DAM (Enter numbers VEHICLE 1 POINT OF IMPACT DAMAGED AREA 00 None 09 Top & windows 10 Undercarriage 11 Total (all areas) 11 Othor	IMPACT AND MAGED AREA s for each vehic POINT OF IMPACT MOST DAMAGED AREA 02 03	ADDRESS ADD	AIRBAG DEPLOYED VEHICLE 1 1 Deployed - front 2 Deployed - side 3 Deployed - both front/sid 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown VEHICLE 2	1 None us 2 Lap & si 3 Shoulde 4 Lap belt 5 Child sa 6 Child bo 7 Did bo 9 Restrain	TRAINT USE VEHICLE 1 ed - vehicle occup houlder belt used r belt only used only used fety seat used oster seat used oroved helmet used t use unknown	TOTAL OCCUPAN ALCOHOL TESTING ALCOHOL LEVEL TESTED BAC LEVEL ALCO DRU SUSPE 1 Neither 2 Yes - ald 3 Yes - ald 4 Yes - ald 5 Unknow	S 100 APPROX. C S NE VEH 1 L Driver No. 1 Y N X HOL/ JGS ECTED alcohol nor cohol suspe ugs suspect cohol & drug	Driver No. 2 VE No. 1 drugs suscited ed gs suspec	EH 2

State of Nebraska

215037304

Investigator's Supplemental Truck and Bus Accident Report This form must be completed in **addition** to the DR Form 40, "Investigator's Motor Vehicle

60210		Accident Rep	ort," if any	of the vehicles involve	d meet the	criteria	listed on the back of	this for	m. s	heet <u>3</u> of <u>3</u>		
LOCAL NO./DISTRICT		1	DATE OF ACCIDE	COUNTY		CITY			STAT	E USE ONLY		
			9/14/2015	Lancaster		Linc	oln					
AGENCY CASE NO.				GHWAY/ROAD/STREET								
B5-085166		1	4th/O-P		, <u> </u>	4						
DRIVER (Print or type full name	ne)			TRUCK	I		1 U.S. DOT		1 ICC MC			
Jordan V Jones					CARRIEF		1077811		I ICC IVIC			
CARRIER NAME (Print or type	e full name)				GROSS VE	HICLE WE	GHT RATING (GVWR)		10,000 Lbs	or Less		
Superior Service	e LLC				or GROSS WEIGHT R		TION VEHICLE CVWR)		(Requires Haz Mat Placards) 10,001 Lbs. – 26,000 Lbs.			
CARRIER ADDRESS (Street or R.F.D.) CITY, STATE, ZIP						rating for ve	hicles and trailers)		More than 26,000 Lbs.			
5840 N. 70th, Li	incolne	e, NE 68507			VEI		NFIGURATION ck one)			ODY TYPE k one)		
TRAILER LICENSE		Year 20°	16	State NE		ngle-Unit Tru		1 🗆	1 Bus (seats 9-15, including driver) 2 Bus (seats 15+, including driver)			
PLATE No	. XKF	001			3	ngle-Unit Tru		2 🗆				
COMMERCE CLASSIFICATIO			WIDTH	DRIVER'S LICENSE CLASS CODE	4 🗖 Tru	ick Tractor		_	Van/Enclose	ed Box		
(Check one)	(Widest par				. =	ick with Tra		5 🛚	Grain/Chips Pole	,/Gravel		
1 Interstate Com		2 102 ind	ches	A 🛭 M 🗌 B 🔲 O 🗎	7 🗖 Tra	ctor with D	oubles	_ =	Cargo Tank Flatbed			
2 X Intrastate Com3 Not Applicable		3 Other	(Specity)	c	9 🔲 Un	ctor with Tr known Hea	vy Truck	8 Dump 9 Concrete Mixer				
	HAZAF	RDOUS MATER	IAL INVOLV		1 =	•	15, including driver) i+, including driver)	10 Auto Transporter 11 Garbage/ Refuse				
Did vehicle have a	Р	lacard Informati		Was hazardous cargo		z Mat Pass z Mat Light	-	_	Other (Spec			
Haz Mat Placard? 1 ☐ Yes	1-Digit Hazard Clas from bottom of Diar		lumber	released? (Do not count fuel from fuel tank)	\ \ \ \(\varepsilon\)	nn, mini var	n, pickup, sport utility) or less GVWR)	13 Unknown				
2 X No	Placar			1 Yes 2 X No			BUS U	 SE				
1-Digit No					Not a Bus ransit Bus	3 ☐ Charter Bus 4 ☐ School Bus	5 ☐ Intercity Bus 7 ☐ Other 6 ☐ Not Reported					
				TRUCK			4 Gollooi Bus	<u> </u>	vot reported			
DRIVER (Print or type full nam	ne)				CARRIE	-	1 U.S. DOT		1 ICC MC			
					IDENTIFI	CATION						
CARRIER NAME (Print or type full name)					GROSS VE			10,000 Lbs. or Less (Requires Haz Mat Placards)				
CARRIER ADDRESS (Street or R.F.D.) CITY, ST.			CITY, STATE	. ZIP	WEIGHT R	•	CVWR) hicles and trailers)	☐ 10,001 Lbs. – 26,000 Lbs. ☐ More than 26,000 Lbs.				
	,				VEHICLE CONFIGURATION				CARGO BODY TYPE			
TRAILER		Veza		Ctata	(Check one) 2 Single-Unit Truck				(Check one)			
LICENSE	lo. Year			State	_ (10	0,001–26,00	00 Lbs. GVWR)		(seats 9-15,	, including driver)		
COMMERCE			WIDTH	DRIVER'S LICENSE	3 Single-Unit Truck (Greater than 26,000 Lbs. GVWR) 4 Truck Tractor (bobtail)				2 Bus (seats 15+, including driver) 3 Van/Enclosed Box			
CLASSIFICATIO (Check one)			TRUCK WIDTH (Widest part of truck or trailer)			ick Tractor ick with Tra		4 🗖	3 Van/Enclosed Box4 Grain/Chips/Gravel			
1 Interstate Com	nmerce 3 102		1 2 1 1 1 1 1		. –	ctor with S		6 🗖	Pole Cargo Tank			
2 Intrastate Com				B O	8 Tra	ctor with Tr	riples	_	7 Flatbed 8 Dump			
3 Not Applicable						known Hea s <i>(seats 9-</i>	ny Truck 15, including driver)	_ =	9 Concrete Mixer 10 Auto Transporter			
		RDOUS MATER			. –	s <i>(seats 15</i> z Mat Pass	+, including driver) senger Car	11 🗖	Garbage/Re	efuse		
Did vehicle have a Haz Mat Placard?	Placard Inform 1-Digit Hazard Class from bottom of Dian Placard.			Was hazardous cargo released? (Do not count		z Mat Light nn. mini var	t Truck n, pickup, sport utility)	'^ _	12 Other (Specify)			
1 Yes				fuel from fuel tank) 1		0,000 Lbs. o	Unknown					
2 No		u. t No		2 No	1 🗖	Not a Bus	BUS U 3 Charter Bus	_	ntercity Bus	7 Other		
						2 Transit Bus 4 School Bus 6 Not F						
NVESTIGATOR NAME (Print	or type)			signature d by Officer Jason A	dame				OFFICER NO.	DATE OF REPORT		
Jason Adams			, .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a ay amour suson A	ــــــان Li	ncoln Po	olice Department		1195	09/14/2015		